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MINISTRY OF HEALTH USSR: CONTROL AND PLANNING FUNCTIONS,
RELATIONSHIP WITH MEDICAL RESEARCH INSTITUTES

[Comment: Although medical service in the USSR is intercon-
nected with national plans for economic development of the USSR,
training of personnel in medical fields and in other scientific
fields has not been centralized. The activity of medical person-
nel has been restricted by manifold mechanisms of control. Medi-
cal personnel are subject to directives, resolutions, and orders
from above.

There appears to be a trend toward relaxation of centralized
control and planning; more responsibility will be delegated to
the executive committees of local soviets and to various commis-
sions chosen from members of these soviets. This has apparently
met with no criticism. Extremely strong criticism of lack of
centralized planning in the training of medical and other scien-
tific personnel has been noted. (See Izvestiya, 14 August 1954,
"On a Few Questions of Training of Scientific Personnel," by
V. Novikov, chief, Administration of Training of Scientific Per-
sonnel of the Academy of Sciences USSR.)

[It appears that a medical worker in the USSR is viewed as
the equivalent of a maintenance man, whose main function is to
utilize available preventive and therapeutic means to maintain
production by keeping the producers physically fit.]

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State Planning Commission and National Plans for Economic Development

Management of the development of the national economy in the USSR has been centered in the Communist Party of the Soviet Union. The most important instruments in government management of the development of the national economy have been the national economic plans. The development of the national economic plans has always been on the basis of a single system of indexes, embracing the development of all branches of production and services. Forms and indexes of national economic plans have generally been developed centrally by the State Planning Commission (Gosplan) USSR. According to Soviet authorities, the needs of public health service and each branch of medical science are provided for in these annual and 5-year plans of economic development. Appropriations for carrying out any plan for capital investment must be approved by the Supreme Soviet USSR. By controlling the purse strings, the Supreme Soviet exercises control over all plans requiring capital investment. (1, 2, 4, 5, 9, 11)

The national plan for 1953 contained over 5,000 statements and items. This involved considerable paper work. The Soviet government, therefore, has decided that centralization of planning may have been satisfactory in the periods before and during World War II, but is contrary to good management and planning at present. It has been decided that, with the great advance in socialist economy during the Fifth Five-Year Plan, it has become feasible to change the methods of planning. For that reason, the Soviet government decided to delegate some responsibility for planning to economic and planning agencies of the union and autonomous republics and their territorial subdivisions. Itemization has been greatly reduced in the annual plans for 1954 and 1955. Beginning with 1955, the annual national economic plan will contain only the most important items. Individual problems will be developed by the Council of Ministers of each union republic and the local agencies of the government will be given the responsibility for working out the details.

The year 1955 is the last year of the Fifth Five-Year Plan. The task is to fulfill and surpass the requirements as set in the directive of the 19th Party Congress. It is expected that reduction in paper work will greatly contribute to improvement in the quality of execution of the plans. Delegation of planning authority is expected to increase efficiency among the great mass of workers and encourage their creative activity. (5)

Union republics, autonomous republics, oblasts (krays), rayons, and cities have always had their own state planning commissions which have formulated plans for construction of projects of minor and local importance. One of the most important tasks of a rayon planning commission has always been to see that the national economic plans are carried out properly. In that respect a rayon planning commission has acted as an overseer for any planned project within its territorial limits. The rayon planning commission still remains an indispensable organizational unit linked to the entire chain of national planning. Successful fulfillment and overfulfillment of annual plans and of 5-year plans is directly dependent on the efficiency of supervision by the branches and divisions of various ministries and efficiency at the local levels. The State Planning Commissions of union republics, autonomous republics, and oblasts (krays) periodically check to determine how plans are carried out locally. (3, 5, 6)

Ministry of Health USSR

Organization and management of public health service in the USSR is vested in the Ministry of Health USSR. The Ministry of Health USSR exercises its authority through the ministries of health of union republics.

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All medical research and experimentation in the USSR is directly connected with the national plan for economic development of the country and with the development of medical science. Soviet authorities have stated that scientific research work in the medical field is carried out in accordance with the problems that are or may be created by the needs of health service resulting from the changed economic profile of the country. The Ministry of Health USSR controls scientific research through its Scientific Medical Council and the Presidium of the Council. The Scientific Medical Council of the Ministry of Health USSR functions in cooperation with the Academy of Medical Sciences USSR, and together they coordinate and plan that scientific research in the field of medicine which may be conducted by the largest medical higher educational institutions and the leading scientific research medical institutes in the USSR.(7, 8, 10, 11)

Membership of the Academy of Medical Sciences USSR is composed of the outstanding scientists of the country, representing various branches of medical science. Smaller faculties and scientific institutes, even though they may not be directly connected with the Academy of Medical Sciences USSR, must conduct scientific and experimental work according to plans formulated by the Scientific Medical Council of the Ministry of Health USSR. Smaller faculties and scientific institutes must coordinate their activities with those under the jurisdiction of the Scientific Medical Council and the Academy of Medical Sciences USSR. Control of smaller faculties and scientific medical institutes is exercised through the ministries of health of union republics.(10)

The Scientific Medical Council of the Ministry of Health USSR keeps track of the most important achievements in the field of medicine and is the sole authority for approving or disapproving new therapeutic methods, new drugs, equipment, instruments, organization of epidemic control measures, tuberculosis prevention, etc. Drafts of new directives and orders of the Ministry of Health USSR are discussed at meetings of the Scientific Medical Council with representatives of interested departments of the Ministry of Health USSR.(8, 10, 11)

Each union republic has its own Ministry of Health organized in the same manner as the Ministry of Health USSR. The Scientific Medical Council of the Ministry of Health of each union republic controls the activities of scientific research institutes and experimental stations on the union republic level. All departments of the Ministry of Health of a union republic work out their plans of operation in close cooperation with the Scientific Medical Council of the Ministry of Health of that union republic.(1, 11)

All orders and directives issued by the Ministry of Health USSR must be followed by health officials of all territorial subdivisions. General supervision over Sanitary-Epidemiological Stations on republic and oblast (kray) levels and of cities (of republic subordination), and the power of commissioning and decommissioning those stations and determining the tenure of the health officer in charge of each station, is vested in the Ministry of Health of the union (autonomous) republic within the territory of which the station may be located. In cities which are divided into rayons, the city health departments exercise general control over their rayons. Sanitary-Epidemiological Stations of lower echelon are under the general supervision of stations of higher echelons. The direct health service organizers and overseers, locally, are the oblast (kray), city, and rayon soviets of workers' deputies. They perform their work through the departments of health.(9)

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The functions of the Ministries of Health of union and autonomous republics and of oblast (krai) and city (of republic subordination) departments of health are very similar. The functions of the Sanitary Epidemiological Stations of the above-mentioned territorial subdivisions are also similar. Sanitary Epidemiological Stations report directly to the Sanitary Epidemiological Control Divisions of the ministries or departments of health of the territorial subdivisions where they are located. All special types of stations, like Brucellosis Control Stations, Tularemia Control Stations, and Malaria Control Stations, operate under the supervision of the Sanitary Epidemiological Stations located within the territory; Sanitary Epidemiological Control Divisions of the ministries (or departments) of health exercise general supervision.(9)

Academy of Medical Sciences USSR

The Academy of Medical Sciences USSR was founded on 30 June 1944. According to its charter it is the highest scientific institution in the field of medicine in the USSR and is composed of the outstanding scientists of the country. The academy is directly responsible to the Ministry of Health USSR to which it submits an annual report on its activities.

The principal mission of the Academy of Medical Sciences is the development and promotion of theoretical and practical medicine and the furthering of the growth of medical science in accordance with the needs for public health protection; the examination of medical problems and distribution of assignments among medical scientific research institutions; the approval of the most important discoveries, recommendations, and therapeutic methods in the field of medicine; the awarding of prizes for the best scientific medical work; and the training of highly qualified scientific workers in the field of medicine.

The budget of the academy and the institutes which comprise it is submitted by the Presidium of the academy to the Ministry of Health USSR, in the over-all budget of which it is included.

There are three types of membership in the academy: active members, corresponding members, and honorary members. The number of active members is fixed at 100 and the number of corresponding members at 150.

The Presidium of the academy is divided into three departments: the Department of Clinical Medicine, the Department of Hygiene, Microbiology, and Epidemiology, and the Department of Medical and Biological Sciences.

To carry out its mission the academy takes the following measures: establishes under its jurisdiction scientific research institutes, laboratories, clinics, libraries, museums, and other scientific research agencies; publishes annually a recommended list of problems to be solved at medical scientific research institutions; reviews the plans and reports of important medical research institutions and of institutes of the academy; appoints permanent and temporary commissions to review discoveries and recommendations and to appraise problems in medical science and public health; establishes and maintains scientific contact with the academies of sciences of the union republics, and scientific institutions and societies in the USSR and abroad; publishes scientific works approved by it; establishes postgraduate courses of study at institutes under its jurisdiction to train personnel for the degrees of candidate and doctor of medical, biological, and pharmacological sciences; and conducts dissertation examinations and approves degrees at meetings of the scientific councils of institutes.

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The Central Scientific Planning Commission is under the jurisdiction of the Presidium of the Academy of Medical Sciences USSR as is also the Commission for Planning Capital Construction. A special Commission for Development of the Five-Year Plan is also formed by the members of the Presidium of the academy.

Active members of the Academy of Medical Sciences USSR meet at least once a year. At this meeting, the plans for various institutes of the academy for the coming year are drawn up. The academy has at its disposal a substantial library, a publishing house, and shops. The following periodicals are published under the auspices of the Academy: Vestnik Akademii Meditsinskikh Nauk SSSR (1946 -), Arkhiv Patologii (1946 -), and Byulleten' Eksperimental'noy Biologii i Meditsiny (1936 -).(10)

Examples of Control by Scientific Establishments of a Specialized Nature

1. Brucellosis Control

Brucellosis Control Stations are scientific establishments of a specialized nature. These stations are formed within the territories of union (autonomous) republics and oblasts (krays) where the disease is more or less prevalent. Brucellosis Control Stations are under the supervision of the Main Sanitary-Epidemic Control Administration. Authority to commission and to decommission a Brucellosis Control Station is vested in the ministry of health of a union republic and requires the approval of the Ministry of Health USSR. The authority to appoint or to dismiss a health officer in charge of a Brucellosis Control Station is vested in the ministry of health of a union republic. All assistant health officers and specialists are appointed and can be removed by the health officer in charge, subject to approval by the ministry of health of the union republic. Appointment and removal of all personnel of subprofessional level and other personnel is in the hands of the health officer in charge of the station.

A Brucellosis Control Station reports to the Sanitary-Epidemiological Station, which relays the reports higher up the ladder of authority. A copy of all reports of a Brucellosis Control Station is sent to the Main Sanitary-Epidemic Control Administration of the Ministry of Health USSR.

Some of the functions of a Brucellosis Control Station are the following:

- a. Combat disease epidemics and to take all necessary measures in localizing and eradicating the disease within the territory of its operation.
- b. Formulate plans and methods of epidemic control within its territory. These plans must be approved by the Sanitary-Epidemic Control Administration of the ministry of health of the union (autonomous) republic or the Sanitary-Epidemic Control Division of the oblast (krai) department of health. Copies of locally approved plans are sent to the Main Sanitary-Epidemic Control Administration of the Ministry of Health USSR.
- c. Perform scientific research work and coordinate the work of all veterinary establishments.
- d. Follow the progress of other medical establishments operating in the field of brucellosis control and be represented at all important scientific conferences.

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e. Disseminate information on the subject of brucellosis control. Publication of any literature on the subject of brucellosis control must be approved first by the ministry of health of the union republic.(12)

2. Malaria Control

The Institute of Malariology, Medical Parasitology, and Helminthology of the Academy of Medical Sciences USSR has general supervision over the conduct of scientific research in those fields. Union (autonomous) republics and oblasts (krays) have the authority to organize Malaria Control Stations, to train specialists in the fields of malariology, helminthology, entomology, and laboratory work, and to call conferences, hold seminars, and disseminate information on the subject.

Other malaria control agencies, like those for water transport and railroad transport, are governed by the regulations issued by the Ministry of Health USSR. All special agencies coordinate their activities with those under the jurisdiction of the Ministry of Health USSR. Abolition or curtailment of the functions of any malaria control establishment requires approval of the Ministry of Health USSR.

The general functions of a Malaria Control Station are to combat malaria and helminthiasis. Malaria Control Stations carry on their work under general supervision of a Sanitary Epidemiological Station, and are subordinate to the Sanitary Epidemic Control Administration of the ministry of health of a union (autonomous) republic or the oblast or kray department of health Sanitary-Epidemic Control Division.(12)

3. Tularemia Control

Tularemia Control Stations are organizations of a specialized nature. They are earmarked to operate in rayons where considerable exposure to tularemia exists. These stations are under the jurisdiction of the Main Sanitary Epidemic Control Administration of the Ministry of Health USSR, the union republic, the autonomous republic, or of the oblast or kray department of health Sanitary Epidemic Control Division. A Tularemia Control Station is under general supervision of either the union (autonomous) republic ministry of health or the oblast (kray) department of health.

This type of epidemic control establishment must be housed in following structures of special types. The chief unit in a Tularemia Control Station is the bacteriological laboratory and a vivarium.

Tularemia Control Stations work in close cooperation with all agricultural agencies. The station formulates plans for combating epidemics in the territory of its operation. All plans must be submitted to the Sanitary Epidemiological Station which in turn submits them for approval to the Sanitary Epidemic Control Administration of the Ministry of Health of the union (autonomous) republic or the oblast or kray department of health Sanitary Epidemic Control Division. A copy of the approved plan is sent to the Main Sanitary Epidemic Control Administration of the Ministry of Health USSR.

One of the main functions of the Tularemia Control Stations is to supervise and conduct scientific research and make investigations to determine the sources of infections. Intensive educational campaigns are conducted among the rural population and services of all local medical personnel are utilized if it is found that vaccination on a large scale is necessary. The Tularemia Control Station is required to make out annual and quarterly reports which it sends to the Sanitary Epidemiological Station. A copy of this report is sent to the Main Administration of Tularemia Control of the Ministry of Health USSR.(12)

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C-O-N-F-I-D-E-N-T-I-A-LControl and Planning Functions of the Ministry of Health USSR: The All-Union State Sanitation Inspection

On 14 December 1949 the Minister of Health USSR issued a directive containing revised regulations governing the functions, structure, and operation of the All-Union State Sanitation Inspection. These regulations were previously approved by the Council of Ministers USSR on 21 November 1949. Soviet authorities gave the following reasons for this new stage of the re-organization program:

1. To meet the rapidly changing economic profile and social structure of the country.
2. To bridge the gap separating all health agencies interested in lowering the disease and mortality rate and in improving living and working conditions of the population.
3. To create a single sanitary epidemic control network in the USSR by establishing interdependence among health agencies.

The authority of the All-Union State Sanitation Inspectors was extended to:

1. Environmental sanitation
2. Construction of canals
3. Construction of new plants and renovation of old ones
4. Inspection of sites for new cities and plants
5. Supervision over manufacture of food products and consumer goods
6. Supervision of any consumer goods put up for sale and used by the great mass of the population
7. Supervision over industries and industrial areas as far as light, ventilation, dust, and smoke are concerned

The State Sanitation Inspectors of the All-Union State Sanitation Inspection were vested with considerable authority. The most important change provided by this directive was the stipulation that no plan could be formulated by any industrial organization without preliminary consultation with representatives of the All-Union State Sanitation Inspection.

The directive of the Minister of Health USSR of 14 December 1949 placed definite obligations not only upon the All-Union State Sanitation Inspection, but also upon the industry involved. Both parties must see to it that the blueprints of any planned project conform in essence with the standards established by GOST (State All-Union Standards). Representatives of the All-Union State Sanitation Inspection were given the right to sit in on meetings of various ministries and directorates in a consultative capacity. Ministries of health of the union (autonomous) republics and heads of the departments of health of oblast (kray), city, or rayon were given no legal right to change directly or to annul the decisions of the State Sanitation Inspector, if his decisions lay within the special authority vested in him by law.

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The position of State Sanitation Inspector of the All-Union State Sanitation Inspection is subordinate to that of the heads of the health departments of rayon, city, oblast or kray. A State Sanitation Inspector may recommend certain action to the head of the health department to which he is assigned, but cannot order him to execute his decision. In case of a disagreement, the State Sanitation Inspector assigned to a rayon health department may appeal to the oblast State Sanitation Inspector or to the rayon executive committee of the party, who has the authority to issue an appropriate order to the head of the rayon Health Department.

In other words, the rayon State Sanitation Inspector is vertically subordinate to the Oblast State Sanitation Inspector and horizontally subordinate to the head of the rayon health department to which he may be assigned. (13,14,15)

Planning and Control Functions: Sanitary Supervision on Hydrotechnical Construction Projects

Hydrotechnical construction projects give rise to a multitude of sanitary problems, including the following:

1. Proper planning, arrangement, and construction of industrial plants, cities, and villages and modernization of old ones to meet new conditions arising as result of construction of hydraulic installations.
2. Solution to problems of water supply for the population, taking into consideration the quality of water and protection of the newly built reservoirs from pollution.
3. Rational utilization of the newly constructed reservoirs for recreational and health purposes, such as sanatoria, rest homes, etc.
4. Proper sanitary measures to meet the requirements of the river fleet:
 - a. Ports, harbors, backwaters, etc.
 - b. Construction of new facilities for fish industry.

These are by no means all the problems that may arise as result of the construction of large hydrotechnical plants. The volume, variety, and complexity of sanitary problems created by new plants and installations require that public health agencies be organized in such a manner that they would be able to render proper therapeutic and preventive service to the population living within the territory embraced by the new construction. Preventive sanitary supervision, during the period of planning and construction of hydraulic plants, is an enormous and responsible job since it also involves industrial, communal, and housing projects.

Factors which influence the construction of new industrial centers and new housing facilities are influenced by the presence of electric power and water within the territory embraced by the hydrotechnical installations. This must be taken into consideration when plans for sanitary control are formulated. As a rule, the housing developments and industrial centers are outgrowths of the construction of hydroelectric stations. It is necessary, therefore, to demand that all those agencies that draft plans for construction of hydraulic plants must anticipate the auxiliary construction projects that may arise. Such needs can be met only under the Soviet conditions of life and under a system of single planning of the national economy.

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The authority to see that all plans are properly executed is vested in the All-Union State Sanitation Inspection and its local branches.

The All-Union State Sanitation Inspection is vested with authority over preventive sanitary supervision within territorial limits of hydrotechnical plant construction projects. The main function of this organization consists of examining and coordinating all preliminary plans and technical drafts for construction of all large hydraulic plants as well as supervision over their construction. The scientific research institutes are drawn into the solution of the principal problems in hygiene and sanitation. These institutes are consulted regarding the sanitary treatment of reservoir beds, malaria prevention, quality of water in the reservoirs, sanitary requirements of the project as a whole, etc. All-Union State Sanitation Inspectors, who are assigned to planning and supervision over the work progress at the large hydraulic plant construction project, receive their operational and methodical guidance from the All-Union State Sanitation Inspection. The All-Union State Sanitation Inspection also provides facilities for personnel under its jurisdiction to do advanced study and thereby improve their qualifications.

As many as three State Sanitation Inspectors of the All-Union State Sanitation Inspection may be assigned to any one project, depending on the size of the project. These State Sanitation Inspectors are subordinate to the Central Administration of the All-Union State Sanitary Inspection. The duties of the State Sanitation Inspector consist of performing daily supervision over the work in order to ascertain whether it corresponds with the approved plan; he acts in an advisory capacity to the management of the construction project and lays down the requirements for all types of preventive sanitation. The State Sanitation Inspectors of an oblast exercise authority only upon these projects to which no inspectors of the All-Union State Sanitation Inspection are assigned.

The duties and functions of the State Sanitation Inspectors of the All-Union State Sanitation Inspection are defined by the "temporary instructions concerning the work of the State Sanitation Inspector of the All-Union State Sanitation Inspection on large hydrotechnical construction projects." These temporary instructions were promulgated by the Ministry of Health USSR on 5 November 1950. The scope and sphere of authority of the State Sanitation Inspector of the All-Union State Sanitation Inspection are also covered by these temporary instructions. Any experience acquired in sanitary supervision prior to World War II is considered qualifying experience for the position of the State Sanitation Inspector of the All-Union State Sanitation Inspection.

The State Sanitation Inspector of the All-Union State Sanitation Inspection exercises preventive sanitary supervision not only over the territory within which the main and auxiliary projects of the hydraulic plant are located, but also over the reservoir flood routing zone and the steam-bed works.

The State Sanitation Inspector of the All-Union State Sanitation Inspection supervises a large number of construction projects. The extent of territory, in majority of cases, covers dozens of square kilometers; single or several construction projects may be scattered over several oblasts. A modern hydrotechnical construction project is a complicated economic organism. The limited time allotted for the immense amount of work necessitates maximum mechanization and construction of a large number of auxiliary plants and factories, such as cement plants, woodworking factories, and machine assembly plants; each one of these plants or factories constitute a large project in itself. Construction of locks, harbors, tailrace, dry docks, etc., must be

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carried out simultaneously with the construction of the hydraulic plant. The enormous flow of goods requires that provision be made for a large railroad junction with a marshalling yard. This also requires additional housing, community services, food, etc.

The number of projects requiring preventive sanitary supervision demonstrates the magnitude and the variety of demands upon the resources of the State Sanitation Inspector of the All-Union State Sanitation Inspection. He must be familiar with the requirements and methods of promotion of community hygiene, industrial hygiene, and food sanitation. Supervision over planning and construction of all large projects, over sanitary treatment of the reservoir bed, over malaria control, and approval or disapproval of projects that are ready to be placed into operation is the duty of the State Sanitation Inspector of the All-Union State Sanitation Inspection.

The principal function of the State Sanitation Inspector of the All-Union State Sanitation Inspection is to see that the approved plan is strictly observed. It must be emphasized here that the plan for hydraulic plant construction is not all inclusive: it does not contain all planned projects that may be necessary and which may be in progress simultaneously with the principal construction project. Moreover, planning for and actual work on the housing development and on some auxiliary plants may begin prior to the approval of the planned project for hydraulic plant. Auxiliary projects which are not covered by the main plan may be planned for by several agencies. Quite a large number of offices, all formulating plans for one project or another, can be found at the site of the prospective hydraulic plant. The situation is complicated by the fact that the chief planner must correlate various plans of each separate agency into a single general plan. Under such conditions the main problem of the State Sanitation Inspector of the All-Union State Sanitation Inspection is the establishing of close contact and understanding with the representatives of planning agencies, influencing their decisions, and achieving the maximum agreement and harmony among all plans.

Preventive sanitary supervision over separate projects that may be in the process of construction along the banks of the prospective reservoir, but which do not have any direct relationship to the hydrotechnical construction project, is performed by the State Sanitation Inspectors of the All-Union State Sanitation Inspection. The Oblast Sanitation Inspectors assist in the selection of land for auxiliary construction projects. Preventive sanitary supervision over progress of work on these auxiliary projects and approval or disapproval of any plans for them is ordinarily the function of the Oblast Sanitation Inspectors. Selection of water storage areas, examination and approval of water mains which carry drinking water, and water for industrial use, examination and approval of plans for pipe distributing systems, and inspection of sewer pipelines and drainage areas for sewage is carried out by the State Sanitation Inspectors of the All-Union State Sanitation Inspection jointly with the State Sanitation Inspectors of the Oblasts.

It can be seen, therefore, that the State Sanitation Inspector of the All-Union State Sanitation Inspection has to maintain very close contact with the Oblast State Sanitation Inspectors.

The second most specific and significant field of operation of the State Sanitation Inspectors of the All-Union State Sanitation Inspection, who are assigned to a hydraulic construction project, is supervision over prompt

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purification and sanitary treatment of the reservoir beds and of the embankments of hydraulic plants. The main plan for hydraulic plant construction must contain provisions for maintenance of sanitary conditions of the reservoir bed and of the embankment of the hydraulic plant. This is important if the supply of water is to be maintained and if that water is to remain suitable and of high quality.

Although supervision over sanitation in areas where separate units of any construction project are located rests with the local agencies of sanitary epidemiological control, general supervision over the quality of sanitary work in preparing the reservoir bed and the stream-bed works is vested in the representatives of the All-Union State Sanitation Inspection.

The third field of operation of the State Sanitation Inspectors of the All-Union State Sanitation Inspection is malaria control within the territory of the hydraulic plant construction. Measure for malaria control must be provided for in the plan for the construction of the hydraulic plant. Malaria control measures have a dual purpose. "Engineering protection" is part of the over-all plan for the hydraulic construction project; this consists of special measures to prevent large areas of shoal water. The second purpose is elimination of muddy soil which may be caused by entrance of subsoil water. Large reservoirs contribute to improvement of the sanitary conditions at least as far as malaria is concerned, because shallow water area is thereby raised. But under the most favorable conditions new water shoals may appear in place of those that have been eliminated. The State Sanitation Inspectors of the All-Union State Sanitation Inspection must foresee such a situation and be prepared to prevent it. Any area selected for housing and industrial development that is within two miles of the zone adjacent to the prospective reservoir must meet with prior approval of the State Sanitation Inspectors of the All-Union State Sanitation Inspection.

The fourth phase of the work of the State Sanitation Inspectors of the All-Union State Sanitation Inspection is to examine completed structures to determine whether they meet all requirements laid down by GOST. Procedure followed in approving completed structures is defined by the regulation found in the "temporary instructions" approved by the Ministry of Health USSR on 5 November 1950.

The above-listed aspects of operation of the State Sanitation Inspectors of the All-Union State Sanitation Inspection on a large hydraulic plant construction project do not completely cover the scope of his activity. His activity extends to supervision over sanitation within the territory of new harbors, tailraces, and other projects under the jurisdiction of the Ministry of the River Fleet which may be under construction. His authority also extends to supervision over sanitation within the territory where irrigation systems and land reclamation are undertaken.

In connection with the hydraulic plant construction projects, a considerable amount of sanitary supervision must be performed by the oblast State Sanitation Inspectors and by the Sanitary-Epidemiological Stations of those oblasts within the territory of which construction is taking place. The principal work of the Oblast State Sanitation Inspectors involves solving sanitary problems in the resettlement of population, transfer of industries and community services away from the zone of flood routing and stream-bed works, approving sites for new cities and villages, and exercising preventive sanitary supervision over the territory where construction projects are in progress. Routine supervision over sanitary conditions are carried out by local agencies of the sanitary-epidemic control service.(16)

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